



POOL PLAN REVIEW PACKET

The following packet contains a list of instructions and requirements that must be met before submittal of an application for a pool plan review, and or, health permit. Included is a plan review checklist, health notes, applications, and placard card. Please take time to review the entire packet. A copy of the Loudoun county pool code is available upon request.

All checklist items must be addressed if applicable. Please sign & return the checklist and other required materials/plans to our office. An environmental health specialist will be assigned your review when all required materials have been received, no more than 5 working days upon receipt.

Plan review success depends on the quality of information submitted.

Overview: Swimming Pool Facility Plan Review Process

When: This applies to all public swimming pool facilities.

- 1) Proposed new public swimming pools.
- 2) Remodeling or equipment changes in an existing facility.

How: The process.

- 1) Site approval by Loudoun County Zoning Department.
- 2) Building Permit Application #
- 3) Well and septic evaluation by HD if not public water and sewer.
- 4) Submit application, drawings, and specs to Health Department.
- 5) An Environmental Health Specialist (EHS) does PRELIMINARY review within 5 working days. EHS works with the contact person on design/equipment changes, and get missing documentation, etc.
- 6) EHS provides memo to Loudoun Building and Development to release building permit.
- 7) EHS inspects facility (2-4 visits). EHS lists corrective action until approved for certificate of occupancy and permit.

What: Provide the following to the Health Department

- 1) "Plan Review Application"
- 2) Two (2) sets of scale drawings (one will be retained by Health dept. one will be returned). One of the sets of plans should be highlighted by the checklist item number.

The following are all items that may be used by us or you to determine if all of the pool health codes are addressed.

- Pool / Filter System plans material specifications & equipment list, fittings, pool elevations, dimensions, construction details, piping, etc.
- Deck materials, slopes, drainage, fencing & gate details, lighting, etc.
- Bathhouse floor plan, electrical, plumbing, mechanical, lighting, finishes, floor slopes, etc.
- Site plan pool backwash to storm drain, topography, emergency access, drainage, etc.
- 3) The list of equipment should be cross-referenced on the layout drawings.
- 4) Manufacturers specifications sheets (1 copy) on all equipment including:
 - Filters, pumps, flow meters, pressure gauges, pump curves, hypo-chlorinators, skimmers, ladders, fencing, gates, hot water heater, anti-scalding devices, etc.
- 5) Plumbing plans: Floor drains, HWH specs, backwash to storm sewer, riser diagrams, etc.
- 6) Filter room, bathhouse, and deck: Electrical, mechanical plans, lighting, and architecture plans
- Switches & receptacles, vapor-proof lights in filter room, telephone connections, ventilation, lighting schedule, finish schedule, floor slopes, etc.

SWIMMING POOL & SPA PLAN REVIEW INFORMATION

LOUDOUN COUNTY HEALTH DEPARTMENT DIVISION OF ENVIRONMENTAL HEALTH PO BOX 7000 1 HARRISON ST SE 2ND FLOOR LEESBURG, VA 20177

Telephone (703) 777-0234 Metro 478-8408 Fax (703) 771-5023

Public swimming pools and health spas shall be constructed in accordance with the Loudoun County Swimming Pool Ordinance 79-01, passed December 3, 1979.

<u>SWIMMING POOLS /SPA PLANS:</u> The plans shall consist of the following:

Two (2) complete sets of drawings/plans and one (1) set of manufacturer's specification sheets are required.

- 1. Site plan indicating the pool, deck, bathhouse (for motel / hotel pools, where bathhouses are not required, indicate the location of the filter room), storm drains, topography, emergency access, etc.
- 2. Pool plans:
 - Show inlet, outlet and vacuum fittings, skimmers, diving boards, lights, ladders, guard chairs, etc.
 - Elevations of pool showing slopes and dimensions.
 - Detailed sections showing inlet fittings, drains, skimmers, lights, hydrostatic relief valves, etc.
 - Piping plans of return, vacuum and drains indicating the pipe sizes and dimensions.
 - Detailed plan and elevation of filter equipment. Include all equipment located in the filter room, and filter room piping, valves, gauges, flow-meters, hair / lint filters, pumps, etc.
 - Detailed plan and sections showing pool structural detail, coping, pool decks and drains, etc.
- 3. Pool/spa decks including material specifications, finish, drains, slopes, etc.
- 4. Details of bathhouse plans shall include the following: floor plan; elevations; plumbing, electrical and mechanical plans; floor slope; typical sections; lighting; finish schedule, etc.

SPECIFICATIONS:

Manufacture's specifications:

- Pool filter system equipment, including pump curves.
- Plumbing fixtures, including anti-scalding device and hot water heater for showers.
- Lighting for bathhouse, filter room, deck, etc.
- Fencing and gates, including clearance above deck, section details, height, etc.

<u>INSPECTIONS</u>: Call the Health Department at least 2-3 days in advance to schedule inspections. A final inspection under operating conditions (chlorine no required) shall be required before the certificate of occupancy is signed.

Loudoun Health Department Swimming Pool Plan Review Notes

FACILITY SITE / SIGNAGE:

- 1. The swimming pool location shall not be subject to flooding.
- 2. Signs shall be provided within the facility complex to direct fire/rescue to the pool.

DECK / FENCING / GATES / LIGHTING/ FOODSERVICE:

- 3. The pool perimeter fence shall be 6 feet high, and not more than 2 inches off deck.
- 4. At least one gate, 4 feet wide, shall be provided for the pool perimeter fence, and shall have a self-closing latch at least 4 feet above the ground.
- 5. An emergency/service gate 8 feet wide shall be provided.
- 6. Pool lighting, if used after dark, shall provide at least 5-foot candles of light, creating no glare on water, or other hazard to bathers.
- 7. The pool deck shall be at least 5 feet wide, and around the entire pool perimeter.
- 8. The deck shall be concrete, non-slip, with a minimum slope of 1/50 and maximum slope of 1/25 away from pool.
- 9. The deck drainage shall create no standing water or nuisance. Roof run-off or other drainage shall not be wasted on the deck.
- 10. Foodservice facilities and smoking areas within pool enclosure shall be separated from pool by 3-foot fence or suitable barrier.
- 11. The wading pool shall be surrounded by a 4-foot fence, with one 4-foot wide self-closing gate. The wading pools within the main pool enclosure shall be separated from the main pool by a 3-foot fence.
- 12. Grassed areas shall have a waist high shower spray at each entrance to deck.
- 13. The area around deck shall drain away from the deck.

BATHHOUSE & FILTER ROOMS:

- 14. The pool backwash shall connect to a storm drain, not to the sanitary sewer.
- 15. The filter room shall be impervious to water and chemicals, and a light color.
- 16. The filter room shall have at two vapor-proof lights, providing a minimum of 20 foot-candles of light.
- 17. Light fixtures in the bathhouse shall be shielded.
- 18. Electrical switches/receptacles shall be waterproof GFI construction.
- 19. A telephone shall be provided, with 911, and the facility name and address posted.
- 20. The filter room floor pitch shall be at least 1/50, providing a dry area by the electrical panels.
- 21. The area adjacent to the filter room entrance shall drain away from entrance.
- 22. A readily accessible room shall be designated and equipped for emergency care.
- 23. The floor of dressing rooms, showers, toilets and lavatories shall have a minimum pitch of 1/50 to drains with no low spots to allow standing water; floors shall be non-slip.

- 24. Rooms shall be ventilated so floors do not remain wet.
- 25. Showers shall have an anti-scalding device(s), and adequate hot water.
- 26. Each shower shall drain separately, and have a soap dispenser.
- 27. Pool rules shall be posted in pool area, dressing rooms, and at pool entrances.
- 28. Warning signs for hazardous materials shall be in the room or area where they are stored.
- 29. Indoor pools will have water heating equipment thermo-statically controlled to maintain the pool at 70° F to 85° F.
- 30. The filter room shall have adequate headroom for repairs.

POOL EQUIPMENT \ PIPING \ PLACARDS \ DEPTH MARKERS:

- 31. Treads on ladders, steps, and stepholes shall be non-slip.
- 32. Underwater lighting shall provide at least one watt per square feet of water surface.
- 33. The influent and effluent filter system pressure gauges shall have 4" faces.
- 34. Flow rate meters shall be on return piping, and be rated to operate at mid-scale.
- 35. Filter system piping shall color-coded as follows: Fresh water-blue, backwash-black, influent-yellow, effluent-white, vacuum-orange. Filter room piping shall be securely anchored.
- 36. A filter room placard shall be provided with the following information: Facility name, location pool capacity, pool water surface area in square feet, pool volume turnover time in hours, and filter system head loss at which to backwash.
- 37. Depth markers shall be provided every one-foot of increment of depth at least every 20 feet on the pool wall and deck, with numerals and letters 5 inches high and in good contrast with pool wall and deck.
- 38. Each inlet shall have a means to adjust flow at least 50%, and shall be readily controlled and accessible without special tools.
- 39. An approved water quality placard shall be posted for public view.

Instructions for submittal of plans and or other pertinent information.

The environmental health staff must review all plans; in order to assess compliance with local and state health codes. A checklist was developed in order to insure that important health code concerns were adequately address. A checklist has been provided to you so that you are aware of exactly what information has to be reviewed prior to approval. In order to expedite this process we request that you go through the checklist and highlight one set of plans/specification sheets/etc. exactly were the item number can be found. The easier it is for us to find the information, the faster the plan review process can proceed. Simply highlight an area/information/health note that corresponds to a particular item on the checklist. The highlight area, and item number, need to be as visible as possible. After each item on the checklist there is an asterisk and note pertaining to where the information can be addressed. In the packet there is a list of acceptable health notes that can be used or written on the plans; you can use them if you wish.

SWIMMING POOL PLAN REVIEW CHECKLIST

Pool Name		
Address		
Pool Types: Main _ Spa _ W	rading _ Other _ (check all that apply)	
Water Supply: Public Private	Sewage: Public Private _	
Please fill out the following info	rmation:	
Main: Gallons Water Surface # Skimmers # Returns Gallons / GPH = turnover	Flow Rate GPM X 60 = Sq ft Turnover rate HRS Flow per Skimmer GPM Flow per Return GPM = HRS	GPH
Spa: Gallons Water Surface # Skimmers # Returns Gallons / GPH = turnover	Flow Rate GPMX 60 = Sq ft Turnover rate HRS Flow per Skimmer GPM Flow per Return GPM = HRS	GPH
Wading: Gallons Water Surface # Skimmers # Returns Gallons / GPH = turnover	Sq ft Turnover rate HRS Flow per Skimmer GPM Flow per Return GPM	GP
Other: Gallons Water Surface # Skimmers # Returns Gallons / GPH = turnover	Sq ft Turnover rate HRS Flow per Skimmer GPM	GPH
Total Bather Load = Sq ft of wa Sq ft water surface: Main	ter surface + Spa + Wading = _	

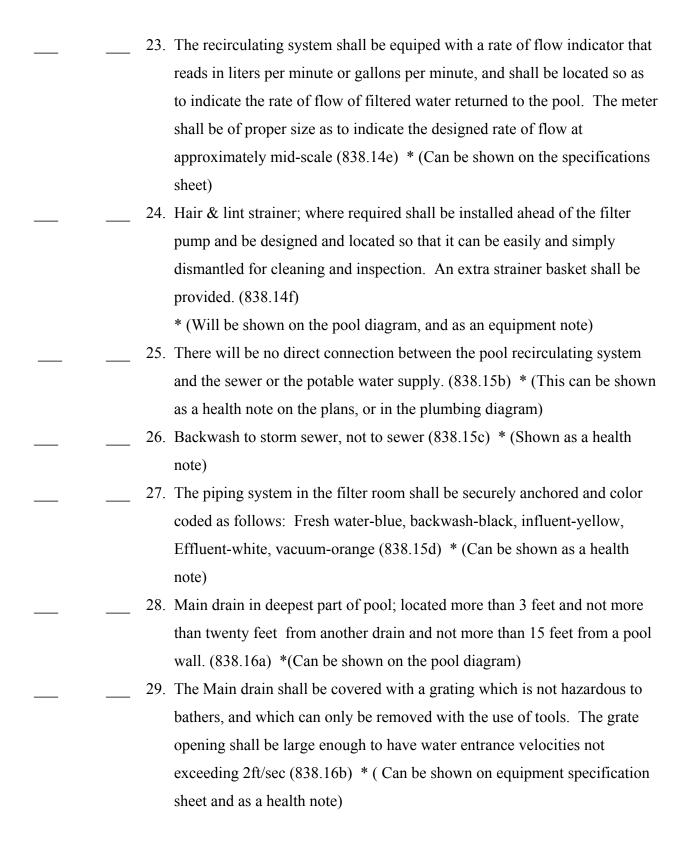
Will EHS

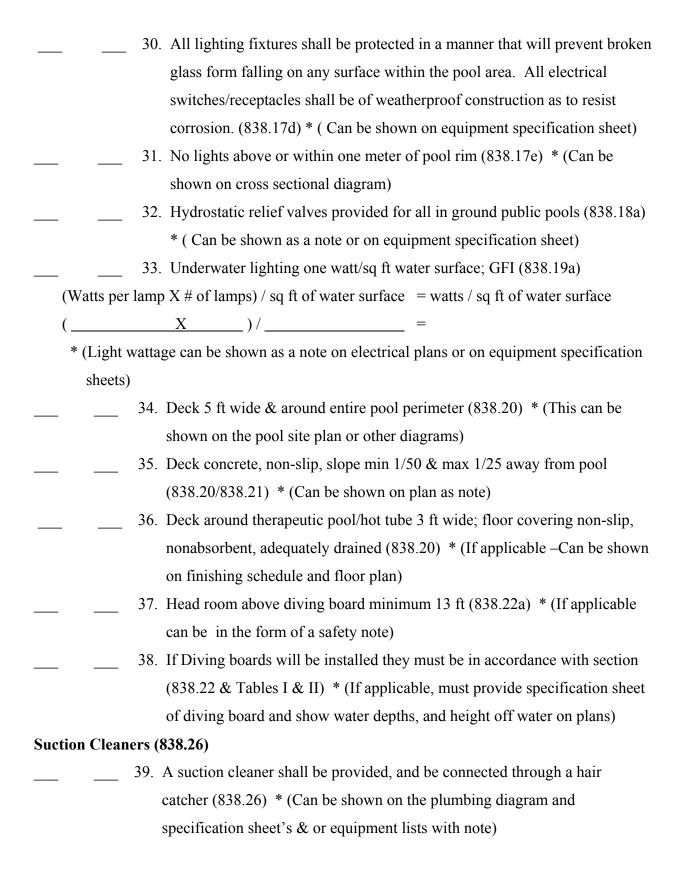
Comply Review

Site Plan:	ITEM#
	 1. Direct and unobstructed access to the pool area shall be provided for the
	admission of emergency and service vehicles, equipment and personnel.
	(838.10) *(Can be easily shown via site plan).
	 2. Where the pool area is enclosed by a fence, a gate opening of 2.5 meters
	(8 ft.) shall be provided(838.10) * (Can be shown on plans, or noted on
	plans)
	 3. Permanent and conspicuous signs shall be posted indicating the most
	direct route to the pool. (838.10) *(This can be in the form of a note on
	the site plan).
	 4. Waste from backwashing shall be discharged into a storm sewer or in a
	manner approved by the health director. When only a sanitary sewer is
	available to the swimming pool, the rate of discharge is subject to the
	approval of the director and the Loudoun County Sanitation Authority.
	(838.15c) *(This can be a note on the plumbing diagram)
	 5. Pool area shall be completely enclosed with an approved fence at least
	6 ft high, not more than 2 inches off deck. At least one gate 4 ft wide,
	self-closing latch at least 4 ft above the ground shall be provided, as well
	as an emergency/service gate 8 ft wide. (838.24) *(Please provide the s specifications
	if not a chain link. * (shown on plans as a note or drawing)
	 6. Grassed areas have waist high shower spray at each entrance to deck
	(838.24) * (shown on the plans as a note)

Total pool perimete	er: ft (Please fill in)
	7. Pools with a perimeter greater than 100ft shall have at least two means of
	egress. For pools with a perimeter less than 100 ft, one means of egress
	will be provided. One additional egress will be provided for each
	additional 200ft of pool perimeter.(838.25)*(shown on pool plans
	view)
	8. Non-slip treads on ladders, steps, & stepholes (838.25) * (shown as a
	note on plans).
	9. Recessed steps have handrail (838.25) * (shown on plans)
Pool Plans:	
10). Construction - white/light color finish, no cracks (838.13). * (shown on
	finishing schedule)
11	. When intended to be used after dark, the pool shall have an illumination
	above the water surface of at least 5 foot candles. The lighting shall be
	designed and installed to prevent glare in the pool and pool area. (838.19)
	* (Can be shown as a note on plans)
Filter Room/Pump	Room:
12	. The filter room shall be finished in a light color and be constructed of
	materials that are impervious to water and chemicals necessary for the
	operation of the pool. (838.14) * (This can be shown as a note on the
	finishing schedule)
13	. Two vapor-proof lights shall be provided in filter room with a minimum of
	20 foot-candles (838.14) * (Can be shown as a note on the filter room
	plan)
14	. Floor slope 1/50, dry by electrical panels (838.14) * (Can be shown as a
	note on the filter room plan)

		15.	. The filter room shall be adequately cross-ventilated and all equipment
			shall be installed so that it is convenient to operate and repair. (838.14)
			* (Shown on HAVC schedule or as a note on plans.
		16.	. Door large enough for removal of all equipment, door must be able to be
			secured against entry by unauthorized persons. (838.14) * (can be shown
			as a note and on filter room layout)
		17.	. Drainage shall be such as to avoid the entrance and accumulation of water
			in the vicinity of the electrical equipment. (838.17a) * (Can be shown as
			slope on floor diagram)
Filter Syst	tem:(8	838.1	<u>l4b)</u>
Filter Des	igns F	Flow	Rates: (838.14c) * (Must comply with one of the following)
		18.	Sand – Flow rate not to exceed 3 gal per minute per sq ft; backwash rate
			shall be 4 x filter rate. * (can be shown on equipment specification sheet)
		19.	High-rate filter – Flow rate not less than 15 gal per minute per sq ft;
			backwash rate shall be the same as filtration rate. * (can be shown on
			equipment specification sheet)
		20.	Diatomaceous Earth filters (pressure or vacuum type) - Flow rate shall not
			exceed 2 gal per minute per sq ft. * (can be shown on equipment
			specification sheet)
		21.	Diatomaceous Earth filter (pressure or vacuum type with slurry feeder)
			- Flow rate shall be less than 3 gal per minute per sq ft; and a backwash
			sump pit with a stand pipe shall be installed to collect spent
			diatomaceous earth so that it can be collected and disposed of with solid
			waste. * (can be shown on equipment specifications sheet, with a note
			addressing the standpipe and collection)
		22.	All other filters require a variance from the health director. * (You must
			submit a letter requesting a filter variance to the Loudoun County
			Department of Health Director)





		40.	If a suction cleaner is operated by the recirculating pump, a device shall be
			provide for throttling the flow from the pool outlets. (838.26) * (Can be
			shown on the equipment specification sheets, or equipment list with a note)
		41.	If portable vacuum cleaners are used, provide outlets near pool for discharge
			of effluent (838.26) * (Can be shown on pool diagram)
		42.	Hydraulic jet-type suction permitted if water pressure 30 psi or more,
			provide backflow prevention device (838.26) * (If applicable can be shown
			on the equipment specifications sheet with note)
Gutters	s/Skir	nmer	rs:
		43.	Overflow Gutters - when overflow gutters are used, they must comply with
			(838.27a) (Will be shown on pool diagrams/specification sheets and in note
			form)
		44.	When skimmers are used, one skimmer per 40 ft of pool perimeter,
			or one per 400 sq ft or less of pool surface. (838.27b) * (Can be shown
			below) pool perimeter ft / # of skimmers = ft /skimmer
			/ = ft / skimmer
		45.	They shall be spaced to provide maximum skimming. (838.27b1)
			* (Can be shown on pool diagram)
		46.	Skimmers weirs shall automatically adjust to water level 3 inches over
			minimum.(838.27b2) * (Will be shown on equipment specifications sheet)
		47.	There will be a removable basket in each skimmer (838.27b3) * (Can be
			shown on equipment list as a note, or on specification sheets)
		48.	Water velocity through skimmer at least 20 GPM & less than 30 GPM
			(838.27b5) * (Can be demonstrated below)
			(gallons per minute / # skimmers) = GPM per skimmer
			(
Safety A	& Rec	sche l	Equipment: *(Can be shown on equipment list or in note form)
Surety (~ 14U		Rescue pole at least 12 ft with blunt end (838.28a1)
			Ring buoy at least 15 inches in diameter with line (150 lb test) at least twice
		50.	the width of pool on racks/hook adjacent to pool (838 28 a 2)

	51. First-aid kit readily accessible (838.28a3)
	52. Readily accessible room designated & equipped for emergency care
	(838.28 a 4)
	53. Room with stretcher/cot, backboard, 2 blankets (838.28a5)
	54. Telephone with 911 number posted (838.28a5) * (Please show location)
	55. Depth markers every one foot of increment of depth at least every 20 ft on
	pool wall & deck. Numerals & letters 5 inches and good contrast with poo
	wall & deck (838.38b)
	56. One lifeguard chair for every 2000 sq ft of water surface (838.28d)
	• (Can be demonstrated below)
	Position of chairs must be shown on pool plans!
	sq ft of water surface / # of guard chairs = sq ft / guard chair
	57. Maximum pool slope of 1 to 12 in water 5 ft or less. Maximum pool slope
	1 to 3 in water greater than 5 ft (838.31) * (Can be shown on pool diagram)
Pool I	nlets:
	58. Pool inlets in walls not spaced more than 20 ft on center around perimeter.
	(838.32) * (Can be shown on pool diagram)
	59. Where inlets are in pool walls, such inlets shall be spaced not more than 20
	on center around the pool perimeter. Where inlets are in the pool bottom, the
	number of inlets shall equal the perimeter of the pool divided by 20, and sha
	be located to ensure proper distribution (838.32). * (Can be demonstrated
	below, and shown on pool plan)
	Perimeter / # inlets =
	=
	60. All inlets, except fresh water & wading pool inlets shall be at least 15 inches
	below the overflow level (838.32) * (Can be shown on cross-sectional
	drawings or as a health note)
	61. Each inlets shall have means to adjust flow at least 50%. The controls for the
	inlets will be readily accessible without the use of special tools (838.32)
	* (Can be shown as a note or on the specification sheet or equipment list)

Other Require	ments:
62	2. Indoor pools will have water heating equipment thermo-statically controlled to
maintain po	ol at 70E to 85E (838.33) * (If applicable will be shown on
	equipment specifications sheet)
63	3. Pool shall have at least one drinking fountain within the pool area readily
	accessible to bathers (838.34) * (Can be shown on the pool diagram plan)
Showers; Wate	er Closets; Lavatories; Solid Waste Storage:
64	. Showers, water closets, urinals and lavatories provided for each sex in the line
	of travel used by patrons prior to entering the pool area with separate entrance
	and exit opening directly to the deck (838.35) * (Can be shown on pool layout
	diagram that incorporates shows bathroom or clubhouse facilities)
65	. Each exit not near deep portion of the pool (838.35a) *(Can be shown on pool
	layout diagram that incorporates bathroom or clubhouse facilities)
66	. Floor of dressing rooms, showers, toilets and lavatories have minimum pitch of
1/50 (1/4 inc	ch per foot) to drains with no low spots to allow standing water,
	floors non-slip (838.35a) * (Can be shown as slope on floor plans or in note)
67	. Room ventilated so floors do not remain wet (838.35a) *(Can be shown on
	HVAC schedule or by note)
68	. Dressing rooms for both sexes with hooks, lockers, wire baskets
	or other sanitary means of clothing storage (838.35b) *(Can be shown on plans
	as a not or equipment list)
69	. Showers in proportion of 1 to 40 persons of max. bather load (838.35c)
	* (Can be shown on plans)
70	. Showers have anti-scalding device(s), and adequate hot water (838.35c)
	* (Can be shown on equipment schedule or as a safety note)
71	. Each shower shall drain separately & have soap dispenser (838.35c)
	* (Can be shown on floor plans and equipment schedule)
72	. Toilets in proportion 1 per 40 females maximum load (838.35d)
	* (Can be shown below and on plans)
	Females toilets (based on gender at 50% of load)

73.	One toilet and one urinal for each 60 males max.load (838.35d) (Based on
	gender at 50% of load): * (Can be shown below and on plans)
	Males / toilets =
	Males / urinals =
74.	Lavatories in proportion 1 to 60 persons max. load, with soap dispenser
	(838.35e) * (Can be shown below and on plans)
	patrons/ Lav
75.	Motel facilities restricted to guests and multifamily dwelling & condominium
	facilities only used only by residents may be exempt and thus do not need
	dressing rooms/ Showers/toilets/Lavatories. The Health Director may waive
	showers (838.35c), toilets (838.35d) and lavatories (838.35e). * (Please put N/A
	if facility is not requesting waiver. If facility is requesting waiver, please mark
	above and submit request)
76.	Solid waste storage facilities in bath house, spectator, and in food service areas.
	(838.35h) * (Can be shown on equipment schedule, as a note, or on plans)
77.	Spectator areas separate from pool with no spectator access. If spectator
	balconies will included they shall not overhang any pool surface (838.36)
	* (Can be shown on site plan or pool plan)
78.	Food prep & service facilities or smoking area within pool enclosure separated
	from pool by 3 ft fence or suitable barrier. Smoking section separated from deck
	by fence (838.37) * (Can be shown on plans with a note)
Wading Pools:	*(If Wading pools will not be constructed or do not exist skip this section)
79.	Wading pool bottom slope no greater than 1 to 15 (838.38) * (Can be shown as
	slope on plans or note)
80.	Wading pools designed with no obstruction within 5 ft outside pool perimeter.
	Wading pool surrounded by 4 foot fence with one 4 foot wide self-closing gate
	(838.38) * (Can be shown on plans with a note)
81.	When wadings pools are within the enclosure of the main pool, they shall be
	seperated from the main pool by 3 ft fence. (838.38c) * (Can be shown on the
	plans with a note, or on equipment schedule)

	82.	Wading pool has filter system separate from any other swimming pool
		(838.38d) * (Can be shown on the pool plumbing diagram, and equipment
		schedule)
Disinfection	on E	quipment:
	83.	Mechanical, positive chemical or open-type chemical feeder shall be provided
		that is capable of applying up to 10 ppm within turnover time (838.39ab)
	84.	Protective clothing - face masks, rubber gloves, aprons or coveralls for handling
		caustic or chlorine chemicals (838.39d) *(Can be shown on the equipment
		schedule or specification sheets)
	85.	Chemical test kit must be provided for free chlorine (range 0.1 ppm-2.0 ppm),
		alkalinity, and pH (range 6.8-8.2). Colormetric range of 0.1 to 2.0 ppm for
		chlorine residual. If cyanuric acid or chlorinated cyanurates used, must measure
		to 50 ppm (838.42g) * (Can be shown on equipment schedule and or
		specification sheet with note)
	86.	Adequate chemical storage, chemicals on hand. (838.42h) * (Shown on plans
		and with note)
Other:		
	87.	Pool rules posted in pool area, dressing rooms and at pool entrances.
		Warning signs posted for hazardous materials in the room or area where stored
		(838.45) * (Can be shown as a health and safety note)
Respo	onsib	le Agent Name
Respon	nsible	Agent Signiture Date
-		
EH	S Re	viewer Date

FILTER ROOM PLACARD INFORMATION

MAIN POOL

Water surface area	sq. ft.	Perimeter	ft.
Volume	gal	Maximum bather load	
Filter media	sand / di	iatomite	
Total filter area	sq. ft. Turnover	rate hours	
Filtration flow rate m	in max. GMP		
Backwash flow rate m	nin max. GMP		
Pressure differential indicati	ion backwash	_ P.S.I.	
Amount of alum to be added	after backwashing		
Amount of diatomaceous ear	rth to be added after b	backwashing	
Capacity of pump	G.P.M. at	ft. head	
WADING POOL			
Water surface area Volume	sq. ft. gal	Perimeter Maximum bather load	ft.
Filter media	sand / di	iatomite	
Total filter area	sq. ft. Turnover	rate hours	
Filtration flow rate m	in max. GMP		
Backwash flow rate m	nin max. GMP		
Pressure differential indicati	ion backwash	_ P.S.I.	
Amount of alum to be added	after backwashing		
Amount of diatomaceous ear	rth to be added after b	oackwashing	
Capacity of pump	G.P.M. at	ft. head	
(Include instructions for bac	dzweshing filters		

SWIMMING POOL & SPA PLAN REVIEW APPLICATION

Office Use Only	DIVISION OF ENVIRONM		
H.D. ID #	PO BOX 7000	EL OOD	
Plan EHS	1 HARRISON ST, SE, 2ND 1 LEESBURG, VA 20177	LOOK	
Date Assigned//	TELEPHONE (703)777-0234 FAX 703-771-5023	1	
	Please Type or Print		
Facility Name			
Address			
City	State _	Zip	
Building Permit Application #			
Agent/Contact		Phone ()
Agent Company		Fax <u>(</u>	
Agent Street		E- Mail_	
Agent City		_ State	Zip
Construction Dates: Begin//	End/	Type:	New Remode
Remarks:			
Applicant's Signature	Date//		
Note: Please attach a completed Health			****
For Office Use Only	DATABASE UPDATE		
Plans Received / /	Inspections	EHS	EHS 2
Reviewed 1st Set/	1st Preopen / /	_	_
2nd Set/	2nd Preopen / /		_
3rd Set//	3rd Preopen / /		_
4th Set / /	Final Insp. / /		

Current Status (S/U/I) __ (Satisfactory /Unsat / Inactive)